



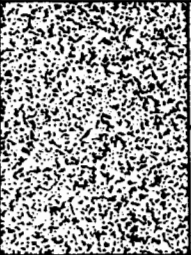
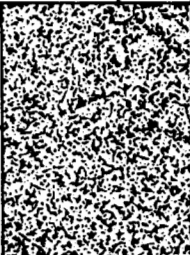
(DO NOT WRITE, MARK, OR STAMP ABOVE THIS LINE)



TENNESSEE DEPARTMENT OF SAFETY



APPLICATION FOR ☐ TENNESSEE SALVAGE CERTIFICATE  
☐ TENNESSEE NON-REPAIRABLE CERTIFICATE

DATE		INVOICE NO.			
TRANSACTION TYPE	CERTIFICATE NUMBER		DATE VEHICLE PURCHASED		
VIN					
LAST NAME		FIRST NAME	MIDDLE INITIAL	MAKE	YEAR
LAST NAME		FIRST NAME	MIDDLE INITIAL	MODEL	BODY TP.
STREET ADDRESS					
CITY		STATE	ZIP CODE	CURRENT TITLE NO.	STATE
	POLICY NUMBER				
	ODOMETER READING				
WRITTEN SIGNATURE OF OWNER					DATE
WRITTEN SIGNATURE (By Power Of Attorney)					DATE

FORM MUST BE PRINTED OR TYPEWRITTEN IN BLACK